

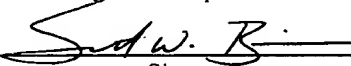
I hereby certify that this correspondence is being deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313
on June 8, 2005

Date of Deposit

Scott W. Brim

Name of applicant, assignee or
Registered Representative


Signature

June 8, 2005

Date of Signature

Attorney Docket No. 8285/476

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Claire Svetlana Vishik et al.

Serial No: 09/990,761

Examiner: Martin, Ciara A.

Filed: November 16, 2001

Group Art Unit: 2157

For: METHOD AND SYSTEM FOR
INTELLIGENT ROUTING
BASED ON PRESENCE
DETECTION

PETITION AND FEE FOR EXTENSION OF TIME (37 CFR § 1.136(a))

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is a petition for an extension of the time to respond to the Office Action dated February 10, 2005 for a period of one- month.

06/14/2005 DENMANU1 00000045 231925 09990761

01 FC:1251 120.00 DA

☒ Applicant:

☐ claims small entity status. See 37 C.F.R. §1.27.

☒ is other than small entity

	<u>Extension Months</u>	<u>Other Than Small Entity</u>	<u>Small Entity</u>
<input checked="" type="checkbox"/>	One Month	\$120.00	\$60.00
<input type="checkbox"/>	Two Months	\$450.00	\$225.00
<input type="checkbox"/>	Three Months	\$1,020.00	\$510.00
<input type="checkbox"/>	Four Months	\$1,590.00	\$795.00
<input type="checkbox"/>	Five Months	\$2,160.00	\$1,080.00

Fee Payment

☐ Attached is a check for \$_____ for the Petition fee.

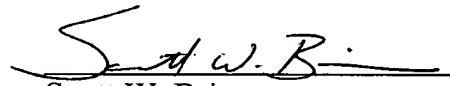
☐ Attached is a credit card authorization form for \$_____ for the Petition fee.

☒ Charge Petition fee to Deposit Account No. 23-1925. A duplicate copy of this Petition is attached.

☒ Charge any additional fee required or credit for any excess fee paid to Deposit Account No. 23-1925. A duplicate copy of this Petition is attached.

Respectfully submitted,

Dated: June 8, 2005


 Scott W. Brim
 Registration No. 51,500
 Attorney for Applicant

BRINKS HOFER GILSON & LIONE
 P.O. BOX 10395
 CHICAGO, IL 60610
 (312)321-4200